Please return form to: Town Clerk Town of North Reading 235 North Street North Reading, MA 01864-1294

PRECINCT

IMPORTANT LEGAL DOCUMENT

TOWN OF NORTH READING 2015 ANNUAL STREET LISTING

General Laws of Massachusetts mandate an annual street listing of residents as of January 1 of each year. As part of this process we are including information that is being maintained in the Commonwealth's Voter Registration Information System (VRIS).

Please update and correct the information provided by adding, deleting, or making changes below the printed information. Please sign and return the form in the enclosed envelope within ten (10) days, even if no changes are necessary. **DETAILED INSTRUCTIONS ARE ON THE REVERSE OF THIS FORM.**

For assistance, call the TOWN CLERK'S OFFICE at (978) 357-5230.

BUSINESS HOURS: MONDAY--THURSDAY 8:00 AM to 4:00 PM and FRIDAY 8:00 AM to 1:00 PM

YOU MAY <u>NOT</u> REGISTER TO VOTE OR CHANGE YOUR PARTY AFFILIATION ON THIS FORM

WARNING: FAILURE TO RESPOND TO THIS MAILING SHALL RESULT IN REMOVAL FROM THE ACTIVE VOTING LIST AND MAY RESULT IN REMOVAL FROM THE VOTER REGISTRATION ROLLS,

If there is no party information next to your name in Column 8 you are not a registered voter. If you are eligible to vote you may register in person at any Town or City Hall in Massachusetts or by mail. To obtain a Mail-In Registration Form you may call (800) 462-8683 (Monday to

PLEASE CONSULT THE DETAILED INFORMATION AND INSTRUCTIONS ON THE REVERSE OF THIS FORM.													
1-Dwelling Address			2- M	IAIL TO PHONE #							unlis	sted	
											<u> </u>		
NAME Please check your name. Make corrections on line below printed name. Please note instructions on the reverse of the form relating to changes made to meet State VRIS requirements. Last Suffix First Middle	MAIL TO: 4	GENDER M/F 9	6 DATE OF BIRTH MMDDYYYY	OCCUPATION	POLITICAL PARTY ∞	9 NATIONALITY IF NOT US CITIZEN	MOVED /DECEASED □	NO. OF DOGS	PUBLIC SAFETY D	'A'=ACTIVE VOTER C	U.S. VETERAN? Y/N 🕁	CHANGE OF ADDRESS OR COMMENTS	# INE SEQUENCE #
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SIGNATURE OF RESPONDENT

DATE

Signed under the Penalties of Perjury as prescribed by M.G.L. Chapter 56 Section 4.

ELECTION CALENDAR

May 5, 2015 - Town Election

TOWN MEETING CALENDAR

The following TM dates are tentative: June 1, 2015 **CENSUS DROP BOX LOCATIONS**

Town Hall - 235 North Street Library - 147 Park Street Carr's Stationers - Stop & Shop Plaza

October 5, 2015

* * * DOG LICENSES AVAILABLE JANUARY 1st * * *

[See Insert]

Visit the Town of North Reading website for Town Meeting, Election and other information www.northreadingma.gov

!!! RETURN YOUR CENSUS FORM PROMPTLY TO REMAIN ON THE ACTIVE VOTER LIST!!!

SPECIAL INSTRUCTIONS - RETURN IMMEDIATELY

This State requirement provides proof of residence to protect voting rights, veteran's bonus, housing for the elderly and related benefits.

THIS FORM DOES <u>NOT</u> REGISTER YOU AS A VOTER

- DWELLING ADDRESS: If your dwelling address is incorrect, make the change in the space below the incorrect address.
- 2. PHONE NUMBER: Check your phone number for correctness. If unlisted, check the box.
- NAMES: ALL family or household members listed at this address. Include any member of the family in Military Service, away at school or confined to a rest home. If a NEW MEMBER has been added to the family or household, enter the name and information in the space provided.
- 4. **MAIL TO:** Designates the person in your household to whom mail should be addressed. If you wish to change the individual's name place an "X" next to the name of the selected individual.
- 5. **GENDER**: Should be "M" for MALE or "F" for FEMALE.
- 6. DATE of BIRTH: If your date of birth is incorrect please make the appropriate changes.
- 7. **OCCUPATION**: Enter occupation, not place of employment.
- 8. **POLITICAL PARTY:** 'U' for UNENROLLED 'R' for REPUBLICAN 'D' for DEMOCRAT 'J' for GREEN-RAINBOW 'CC' for UNITED INDEPENDENT PARTY ("Unenrolled" is a registered voter who is NOT affiliated with any party) All other letters represent "political designations" and may not participate in primary elections.
- 9. NATIONALITY: Enter nationality if not U.S. citizen.
- 10. MOVED/DECEASED: If this individual has moved or is deceased please indicate with an "M" or "D".
- 11. NO. OF DOGS: Number of dogs licensed to this individual.
- PUBLIC SAFETY: Check this box if you are a member of a public safety agency and work and live in this community.
- 13. **VOTER STATUS:** Indicates whether a person is an" active" or "inactive" voter.

 If you do not return your census form and are currently an "active" voter, your voter status will become "inactive".
- 14. VETERAN: Check if you are a U.S. Veteran.
- 15. **CHANGE OF ADDRESS:** If you have a new address or other information you wish to provide the town list that information below.

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LINE SEQUENCE NUMBER	NEW STREET ADDRESS	NEW CITY/TOWN NAME	NEW STATE	NEW ZIPCODE							
LINE SEQUENCE NUMBER	COMMENT OR MESSAGE IF GENERAL COMMENT AFFECTING ENTIRE FAMILY UNIT YOU MAY OMIT SEQUENCE NUMBER										